PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

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SREPHEN G MATZUK PO BOX 767 BOSTON, MA 02102



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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Stephen G. Matzuk	(Depositor's name)
Star G. Match	(Signature)
5 Pec 03	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/382,763	08/25/1999	GEORGE E. DEROME	ADIC-1	5650

TITLE OF INVENTION: DUAL-MODE TRANSMITTER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$650	\$0	\$650	12/08/2003
EXA	MINER	ART UNIT	CLASS-SUBCLASS]	
CHOW, CHA	CHOW, CHARLES CHIANG		455-103000		

Change of correspondence address or indication of "Fee Address", (37-CFR 1,363) R 1,363)
Change of correspondence address (of Change of Correspondence of Address from PTO/SB/122) attached

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR alternatively (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE

Henry B Wallace to George

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ase check the a	ppropriate a	assignee cat	egory or	r categories (will n	ot be printed	on the	e patent);	⊔ individu	ual	☐ corporation or other private grou	ıp

☐ government

4a. The following fee(s) are enclosed:

Issue Fee

4b. Payment of Fee(s):

Uf A check in the amount of the fee(s) is enclosed.

☐ Publication Fee ☐ Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 132189 (enclose an extra copy of this form).

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(Date) (Authorized Signature) 6 Dec OI

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